Employment of People with Disabilities
Identifying Barriers and Creating Opportunities

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Author’s Note
Throughout this report identity first language is used. Most individuals are familiar with person-first language, however, because this report compares disability to other identities such as race and gender it was important to maintain consistency. Furthermore, data on this population is not consistent or drillable as with other identities such as gender and race, nor is strong intersectional data available. Also, people can have more than one disability, therefore total reported disabilities is not equal to the population size, hence why we focus on those with at least one reported disability as a more consistent measure. Lastly, this report does not include hidden disabilities (~10% of the American population) as data was not available at the local level.
Executive Summary
This report is a deeper exploration into the demographic and disparities of people with disabilities in Rochester and Monroe County. People with disabilities in Rochester face poverty at a level that is the greatest of the 75 largest metropolitan areas in the country. The goal is for the community to gain a better understanding of this population and key barriers they face to obtaining self-sufficiency. While data sources were limited to the United States American Community Survey, the authors examine how the disabled are an over-looked but key portion of those in poverty in Rochester. Key Findings include:

- The disabled have significantly higher rates of unemployment and show significant disparities in earning.
- Disabled individuals are over-represented in the lowest paying industries and earn less than their nondisabled counterparts, which overlaps with data from previous reports.
- Educational attainment is low among disabled individuals and more specifically the low graduation rate for students with disabilities in the Rochester City School District perpetuates the cycle of poverty.
- Employment rates for disabled in Rochester are almost three times lower than for nondisabled.

In order to move the needle on poverty, it is imperative that disabled individuals be included in the workforce and in anti-poverty work. Targeted approaches towards increasing employment for those who are not in the workforce, along with strategies for increasing wages would be impactful for realizing RMAPI’s long term goals of poverty reduction.

The Monroe Anti-Poverty Initiative (RMAPI) was developed to coordinate resources, policies, and practices across the community to address poverty. However, anti-poverty efforts thus far have not meaningfully included people with disabilities. A community wide commitment to hiring and supporting people with disabilities is needed so that disabled Rochesterians are not the poorest disabled urbanites in the country.

Background
Rochester has been undergoing a deep examination of poverty and its impact on the city and county. The Rochester Area Community Foundation, ACT Rochester, and the Rochester Monroe Anti-Poverty Initiative (RMAPI) began this work in 2015. In 2017 they released a joint statement that Rochester continues to rank fourth in overall poverty among the nation’s 75 largest metropolitan areas, and first in overall poverty, child poverty, and extreme poverty among comparably sized cities.

Within ACT Rochester’s 2015 poverty report update was a section on poverty and disability that garnered little attention, despite the stark data. According to Census data, over 34,000 Rochesterians had at least one disability. The poverty rate among people with disabilities was 42.1%; 9.2 points higher than those who were not disabled. Overall, 22% of all people in poverty in Rochester had at least one disability. Furthermore, the report showed that Rochester ranked number two by percent of population with some disability (16.4% as compared to Buffalo at number one with 16.5%). This combined with the high poverty rate for disabled individuals (42.1%, second to Hartford’s 42.8%) meant that Rochester ranked number one by percent of total population that is both in poverty and with some disability (Chart U of the report. The lowest was Raleigh at 1.7%). Thus, addressing the causes of poverty for people with disabilities will be critical to our community efforts to significantly reduce poverty.
Despite this data, initiatives in the community at large have not had a specific disability focus. In the late summer of 2017, the Mayor’s Office of Innovation released a report on the impact of racism, sexism and ableism\(^1\) on wages and their link to poverty.\(^4\) The report had several key findings:

1. 62% of part-time/part year workers were not self-sufficient
2. Minorities are concentrated in the largest and fastest growing industries
3. Across industry sectors, minorities earn less than their white counterparts
4. Even when controlling for educational attainment, minorities earn less than their white counterparts
5. Healthcare is the fastest growing industry with a high number of workers with low wages
6. 44% of home health aides are not self-sufficient. Home health aides and their families make up 5% of those who are not self-sufficient

The report concluded that disabled individuals have a significant earnings gap in comparison with their nondisabled counterparts. The report also called for further investigation of poverty and employment for disabled persons in Rochester, and the various barriers disabled persons face in their journey towards self-sufficiency, which this paper seeks to address. Building upon this work, the data shown in this paper highlight that similar findings hold true for disabled individuals giving further credence to disability being a key component, and not separate, to anti-poverty initiatives moving forward.

**Demographic and Geographical Context**

Disability itself comprises a wide range of conditions. There are multiple definitions of disability but for the sake of this paper, we will refer to a disability as defined by the Americans with Disabilities Act and the US Census which is a person who has a physical or mental impairment that substantially limits one or more major life activities. The census defines as having one or more of the following:

1. Self-care difficulty
2. Hearing difficulty
3. Vision difficulty
4. Independent living difficulty
5. Ambulatory Difficulty
6. Cognitive difficulty

\(^1\) Ableism has many definitions. Essentially, it is systems that favor nondisabled individuals as the default, such as steps leading towards the front door of a home, as well as negative attitudes towards the disabled. For a list of these varied definitions see [http://disabledfeminists.com/2010/11/19/what-is-ableism-five-things-about-ableism-you-should-know/](http://disabledfeminists.com/2010/11/19/what-is-ableism-five-things-about-ableism-you-should-know/)
Geographically, Census data, as shown in Figure 1, offers evidence that those who are disabled are more concentrated in the highest poverty tracts in the City of Rochester. Census data also shows that Native Americans (25.1%) and Black people (18.5%) have a higher incident rate of disability than Whites (17.5%) and Asians (5.2%). While incidence rate can increase with age, data shows that working age adult (18 – 64) have a combined rate of 34.2%, compared to those 65 and up. Lastly, of the types of disability reported, the most prevalent are ambulatory (9.7%) and cognitive disabilities (9.2%), while hearing (3%) and vision (2.9%) were the least prevalent.\(^5\)

**Employment**

Wages are a critical factor for moving into self-sufficiency. However, employment for disabled individuals is low. According to the Census, only 6,080 individuals with at least one reported disability are employed. Here, we’ll examine the employment landscape and then explore barriers impacting employment.
Figure 2. The unemployment percentage for the disabled in Rochester (22.3%) and Monroe County (17.2%) is about triple that of the national rate for nondisabled (6.8%). Employment rates for disabled in Rochester are almost three times lower than for nondisabled. Source: ACS 2012 – 2016 5 Year estimates

The graph above in Figure 2 illustrates that disabled individuals are more likely to be unemployed and not in the labor force than their nondisabled counterparts. Labor force participation rates mean that a person is employed or seeking employment. The unemployment percentage for the disabled in Monroe County, at 17.2%, is moderately higher than the national unemployment percentage for the disabled (15.5%). The unemployment percentage for the disabled in the City of Rochester, at 22.3%, is even higher and more than triple both the national (6.8%) and county unemployment percentages for the nondisabled (6.6%). The percent of the disabled not in the labor force in Monroe County is slightly higher than the national rate (59%). However, at 67.4%, the percent of the disabled not in the labor force in the City of Rochester is more than 8 percentage points above the national percentage (59%) and more than triple the percentage for the nondisabled (19.1%). Furthermore, at 25.3%, the employment percentage rate for the disabled in the City of Rochester is more than 9 percentage points lower than the national rate (34.6%) and only slightly more than a third of the rate for the nondisabled (75.4%). For those who are employed, a look into their earnings highlights other barriers to self-sufficiency.
Figure 3. Median earnings for disabled in Rochester are $14,450 as compared to their nondisabled counterparts ($25,116). Source: ACS 2012 – 2016 5 Year estimates

Figure 3 shows that although the median individual earnings for nondisabled individuals is higher in Monroe County than the national median, the median individual earnings for the disabled in Monroe County, at $17,582, is nearly $4,000 below the national median for disabled individuals. And in the City of Rochester, the median individual earnings for the disabled is even lower, at $14,450. Just as in the wage disparities report, disability has an impact on earnings as does race and gender.

Figure 4. Disabled individuals are over-represented in lowest paying industries. Source: ACS 2012 – 2016 5 Year estimates
Figure 4 shows the proportion of industry workforce made up by those with at least one disability. Disabled individuals in Rochester are over-represented in the same lowest paying industry sectors as shown in the wage disparities report. These sectors also coincide with the sectors where minorities were also over-represented (note: disability, race, and gender are not mutually exclusive but current data is often unavailable for intersectional lenses). According to 2017 ACS one year estimates, of those who worked full time ages 18 to 64, 40.9% had a hearing difficulty. Yet this disability category has one of the lowest incident rates at 4.5% for this age range. 25.6% of those who worked full time with a disability had an ambulatory disability. For those employed less than full time ages 18 to 64, 57% had a cognitive disability yet the incident rate for this age range is 17%. Also, those with cognitive disabilities are subject to lower wages due to the Fair Labor Standards Act. Under this piece of legislation, it is legal to pay workers subminimum wages, sometimes as low as $.25 per hour. As was shown in the wage disparities report, part-time/part-year workers made a bulk of those in poverty. So not only are they more likely to be less than full time, they also earn even less than that category of workers thereby showing that those with cognitive disabilities have compounding factors impacting employment. For those who are 18 to 64 who did not work, 56.9% had an ambulatory disability. The incident rate for ambulatory disabilities for persons in this age range is the highest of any category at 17.9%.

The data is clear in that employment for disabled individuals is low and even when they are employed disparities in earnings exist that inhibit them from being self-sufficient. Examining the factors or barriers to not only employment, but higher wages, is critical in order to effect change for disabled individuals.

Factors Impacting Employment

The United States Senate Committee on Health, Education, Labor, and Pensions, led by Senator Tom Harkin, released a reported that gave a few hypotheses for why the disabled are not at parity with their peers as regards self-sufficiency:

1. Low educational attainment
2. Discrimination from employers
3. Difficulties in getting off of assistance programs like Supplemental Security Income
4. Transportation barriers
5. Inability to work

Educational Attainment

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Figure 5. Educational attainment comparison for disabled and nondisabled in Rochester and Monroe County. Disabled individuals have poorer educational outcomes than their nondisabled counterparts. For example, 31.8% of disabled in Rochester have less than a high school education as compared to 15% of their nondisabled peers. Only
9.9% of disabled in Rochester have a Bachelor’s or higher as compared to 28.1% for nondisabled in Rochester. 
Source: ACS 2012 – 2016 5 Year Estimates

Education is often seen as the great equalizer. But what does that mean for students with disabilities? The data shows that in the City of Rochester, educational attainment of the disabled is quite low. In fact, according to a 2017 report about Special Education in the Rochester City School District, the district’s adherence to policies and helping disabled students graduate is abysmally low. The report declared that disabled students are set up to fail. They experience higher mobility rates (there’s no “feeder pattern” in schools for students with disabilities so they are shuffled around to receive basic services), higher suspension rates, and this translates to lower educational attainment due to decreased access to opportunities for learning. According to the report of the RCSD Board’s Special Committee on Special Education, most children with disabilities, with appropriate programs and services can be expected to graduate and to go on to either market rate employment or higher education. But despite modest improvements over the past several years, less than one third of Rochester’s students with disabilities graduate.

This does not end at high school. It’s important to note that the IDEA (Individuals with Disabilities Education Act), which is mandated for K-12 education to support the success of students with disabilities, is not available for college students. Furthermore, due to the inconsistent implementation of the ADA at colleges and universities, and the loss of attendant care following the person out of high school, the hurdles of completing a collegiate degree are quite high for students with disabilities. And when disabled students do graduate, studies also show that it takes longer to find employment, either due to health or issues with lack of accommodations (or both). These factors suggest that the low college graduation rates for students with disabilities are structural in nature and abundant at the collegiate and graduate levels.

Housing

Housing can play a critical role in moving towards self-sufficiency. However, there is no local data or study at the time of this writing that assess accessibility of housing in Rochester. The Center for Disability Rights has stated that lack of housing is a leading barrier in moving disabled individuals from institutions and into the community. An inability to live in the community can significantly impede a disabled person’s efforts to become employed, and thus, increases the probability of living in poverty.

A 2011 study conducted by the U.S Department of Housing and Urban Development (HUD) stating that less than two percent of available housing stock is accessible, particularly to those with mobility difficulties. Fewer than five percent of units were livable by a person with a mobility disability. Race was another factor: units occupied by Blacks or Asians were less likely to be accessible than those occupied by Whites. Furthermore, householders with bachelor’s degrees are least likely to reside in accessible units. The researchers concluded that “fewer than two percent of housing units are accessible.” The study goes on to show that the older a region/city is, there’s a lower share of accessible units but newer units tend to be more accessible. This coincides with anecdotal reports on the lack of affordable accessible housing in the mid-income range, thus creating a cliff; either earn enough to move out of poverty and go into inaccessible housing or not earn at all to keep accessible low-income housing. Additionally, CDR participants and staff indicated that housing costs of those who do work were 40 -
45% of their income and many are forced out of the City, particularly downtown, in order to have reasonable housing.

**Transportation**

According to Census data, of those disabled who do work, 54.9% utilize a car or truck as their main form of commuting like the majority of those in Rochester. However, cost of car ownership is higher for many disabled individuals than for nondisabled individuals. For those who need specialized equipment to use their hands to drive, the minimum cost is $1,000 on up towards $15,000 or more. These are specific to the needs of the individual. Time cost is another factor. Between finding a service to evaluate your needs to actually getting (if you qualify) the assistive devices, it can up to six months or more. There are assistance programs that help with modification of vehicles such as ACCES-VR, a PASS plan, or vehicle assistance programs with certain vehicle brands. Each come with their own restrictions. For example, ACCES-VR will not purchase a vehicle for a participant. Vehicle modifications are approved only for goals that involve employment and the vehicle must be no older than five years from the date of application. Furthermore, the vehicle cannot be leased. So if one has a mobility impairment and is in need of a van, then the cost can be a financial hardship given median earnings.

With the addition of Uber and Lyft services to the Rochester area, many think that this is a boon for the disabled population. However, low median earnings of disabled individuals means that cost is an issue. Furthermore, the majority of vehicles are not modified for those utilizing mobility assistance devices. Compliance with the ADA has been inconsistent and many disabled users across the country have anecdotes of verbal abuse from drivers, and stories of drivers refusing to take a passenger. Just this year, Uber, Lyft, and Via have put forth a legal action to not abide by the ADA.

Issues of transportation can often be associated with housing. Often, accessible housing is not co-located nor near places where disabled individuals utilize services. New housing that may be accessible is being built in the suburbs. With Rochester’s current transportation system not adequately serving suburban areas, this also means that housing is not along bus routes and can be outside the service area of para-transit. Therefore, transportation and housing are compounding barriers to employment. The inability to get to jobs is very often a deterrent to being employed and thus, a contributor to a disabled person’s poverty.

**Systems Barriers**

Further impacting the ability to obtain employment is the availability of home health aides and personal care attendants. As discussed in the wage disparities report, home health aides and personal care attendants are the fastest growing job titles in the City of Rochester. Wages for these job titles have remained stagnant and a significant portion of them are in poverty. Furthermore, not only is turnover high for these positions, but there is currently a shortage of aides available. If a disabled individual is reliant upon aides to help with activities of daily living, such as showering, getting dressed, and toileting, and is receiving inconsistent care due to the aforementioned issues, then they could potentially be seen as less reliable employees. Furthermore, working aged disabled adults are becoming the fastest growing population in institutions such as nursing homes, suggesting that due to this shortage they are being pushed into those institutions instead of staying in their communities.

Another barrier to higher income are the myriad of thresholds for Medicaid. Many disabled individuals fear losing their benefits due to ignorance of these thresholds, however the Medicaid Buy-in Program—a specialized program that allows you to retain Medicaid benefits and be gainfully employed—in New
York States sets a low income threshold for both individuals and married couples. For those who need a HHA or PCA, they must be on Medicaid in order to obtain those services. So if one obtained a Master’s degree, they’d need to earn below $61,000 (or $83,000 for a married couple’s salaries combined) in order to receive the services they need to maintain employment. And while complicated workarounds to this exist, the nature of these low thresholds are a disincentive to work and should be revisited. Additionally, there are myths in the community about losing benefits upon employment. The hidden thresholds of Medicaid only adds to the disincentives for potential workers. Coupled with this, the Social Security Administration has a myriad of programs that can help enable disabled individuals to get back to work outlined in their Red Book. These programs, however, are under-utilized and staff and recipients are often unaware of the existence of these programs.

Conclusion

Many disabled individuals in Rochester and Monroe County face are not self-sufficient. The data in this report show significant disparities in earnings and employment that coincide with disparities seen with race and gender. Disabled individuals are over-represented in the lowest paying industries and earn less than their nondisabled counterparts just as was shown with race and gender. Educational attainment is low among disabled individuals and the shortage of direct support workers, largely a result of low wages, impacts the ability of disabled individuals to obtain and retain employment. In order to move the needle on poverty, it is imperative that disabled individuals be included in anti-poverty work and not seen as in need of separate interventions. Furthermore, targeted approaches towards increasing employment for those who are not in the workforce, along with strategies for increasing wages would be impactful for realizing RMAPI’s long term goals of poverty reduction.

Recommendations for Reducing Poverty of Our Disabled Citizens

Employment

It is incumbent on the Rochester community to examine its discrimination of disabled people, especially in the area of employment. The business community in particular must recognize the benefits of hiring people with disabilities. Wages are the lynchpin to moving out of poverty. The following can begin to address the disparity:

- Interagency collaboration throughout Monroe County that leverages resources to help people get, retain and grow in jobs. Moving disabled individuals into full-time employment in high skill, high wage paying jobs is critical for reducing poverty.
- State agencies, community-organizations and employers must improve the existing service system so that it adequately encourages and delivers appropriate benefits counseling. More specifically the Rochester community must develop a culture that helps people understand Medicaid thresholds and other support services with improved employment outcomes as the goal.
- Businesses in the Rochester community must be encouraged to engage with the New York Business Leadership Network and formally make a commitment to hiring people with disabilities.
- The Rochester community must formally adopt the New York State Employment First Commission’s recommendation to implement cultural modeling. This includes state agencies

and their respective community-based organizations effectively modeling the employment of
disabled persons.

- Community-wide commitment to abandon sheltered workshops and 14c licensure under the

Education

The Children’s Agenda has proposed a few recommendations for RCSD:

1. **Align continuum of services**: Programs and services for students in special education should be
   available in as many school buildings as possible so that students don’t have to change schools.
2. **Mandatory professional development & support**: Every school staff person who works with
   students with individualized education plans should have mandated proper training to support
   those students, along with consistent support.
3. **Prevent suspensions**: Schools should reduce suspensions of students with disabilities and they
   should have more prevention programs to help avoid suspensions.

Furthermore, higher education needs to make immediate commitments to Section 504 of the
Rehabilitation Act and ADA to ensure success of disabled students during and after college.

Housing

Rochester needs an assessment of its housing stock from an accessibility lens. Furthermore, with wages
and earnings being so depressed for disabled individuals, meaningful re-calculating of AMI would allow
them to move into better housing. Furthermore, ending of quotas and extending universal and
visitability design standards would fill the gap in housing and enable disabled individuals to move closer
to the services that they utilize.

Transportation

Meaningful practices need to be employed around transportation:

- Piloting alternative inclusive rideshare
- Piloting on-demand services using paratransit
- Improving timeliness of paratransit

All while keeping prices low are critical to helping maintain employment. One cannot be employed if
one lacks transportation to their place of employment.

Systems Redesign

While not gone into detail in this report but highlighted in Senator Harkin’s report, there are a myriad of
barriers that are systemic in design. For example, Social Security and Medicaid thresholds are unclear
and could use standardization with conspicuous forms for both recipients and DSS workers alike to
utilize. RMAPI Systems Redesign and Policy teams should work together to look at these in depth and
begin a framework for change at the local and state level.

References